PTO/SB/22 (09-06) gh 03/31/2007. OMB 0651-0031

Land of the	ne Paperwork Reduction	n Act of 1995, no persons are require		Trademark Office; U.S	S. DEPARTMENT OF COMMERCE f displays a valid OMB control number.	
TITIO	N FOR EXTEN	SION OF TIME UNDER 3	7 CFR 1.136(a)	Docket Number	(Optional)	
(Fees p	ursuant to the Con	FY 2006 solidated Appropriations Act,	2005 (H.R. 4818).)	S14	46.70000US01	
Application	on Number	10/702,099-Conf.	#6804	Filed	November 5, 2003	
FOT	ETHODS AND A /ITH AN ITEM	APPARATUS FOR COMML	JNICATING CONDI	TION INFORMA	TION ASSOCIATED	
Art Unit	2876			Examiner	U. C. N. Le	
identified	application.	e provisions of 37 CFR 1.1				
The requ	ested extension	and fee are as follows (che	·			
F:	X One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$120	Small Entity F \$60	<u>eee</u> \$ 60.00	
	=	(37 CFR 1.17(a)(2))	\$450	\$225	\$	
<u> </u>	╡	s (37 CFR 1.17(a)(3))	\$1020	\$510	* ———	
<u> </u>	╡	(37 CFR 1.17(a)(4))	\$1590	\$795	\$ \$	
}	=	(37 CFR 1.17(a)(5))	\$2160	\$1080	*	
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		mall entity status. See 37 (
X A	check in the am	ount of the fee is enclosed.				
Pi	ayment by credit	card. Form PTO-2038 is a	ittached.			
T	The Director has already been authorized to charge fees in this application to a Deposit Account.					
	ne Director is he eposit Account N	reby authorized to charge a lumber23/2825		·	redit any overpayment, to copy of this sheet.	
	. []					
I am t	~p	plicant/inventor.			1	
		signee of record of the entiin Statement under 37 CFR	3.73(b) is enclosed	. (Form PTO/SB	/96).	
	att	orney or agent of record. F	Registration Number	·		
		orney or agent under 37 CF				
	2010	Registration number if acting u	nder 37 CFR 1.34	54,986	•	
	Men	Signature			Date	
		Melissa A. Beede		(6)	17) 646-8000	
		Typed or printed name	.		phone Number	
	Signatures of all the ir e signature is required	ventors or assignees of record of the see below.	entire interest or their repre	esentative(s) are require	ed. Submit multiple forms if more	
	Total of	1 forms are subn	nitted.			

Certificate of Mailing Under 37 CFR 1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

(Janet D'Annunzio-Ellis)

04/23/2007 CCHAU1

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PTO/SB/17 (02-07) Approved for use through 02/28/2007. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE er the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** 10/702,099-Conf. #6804 November 5, 2003 FEE TRANSMITTAL Filing Date Rupert A. Schmidtberg First Named Inventor For FY 2007 Examiner Name U. C. N. Le Applicant claims small entity status. See 37 CFR 1.27 2876 Art Unit S1446.70000US01 TOTAL AMOUNT OF PAYMENT 120.00 Attorney Docket No METHOD OF PAYMENT (check all that apply) x Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 23/2825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of x | Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity Small Entity Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims** Fee Paid (\$) **Multiple Dependent Claims** Fee (\$) 0 40 - 41 = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. Extra Claims Fee Paid (\$) Indep. Claims Fee (\$) 0 x 0 = 3 HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$)

SUBMITTED BY						
Signature	1/1/ dush Reed	Registration No. (Attorney/Agent) 54,986	Telephone	(617) 646-8000		
Name (Print/Type)	Melissa A. Beede		Date	April 20, 2007		

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month

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ı	11/20/07 h 20/2 is-Clus
ı	Dated: 4/20/07 Signature: June & Annuncia (Janet D'Annunzio-Ellis)

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